FORM D JAN - 3 2003

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

12/30/8

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							
hours per respo	nse 16.00						

SEC USE	ONLY
Prefix	Serial
1	1
DATE RE	CEIVED
[i

SiGe Semiconductor, Inc.,			• .	es B Preferred Sha	ires PRACESSE
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	Rule 506	Section 4(6)	ULOE (
Type of Filing: New Filing	Amendment	_			1AN 0 7 2002
	A.	BASIC IDENTI	FICATION DATA		
1. Enter the information requested abou	t the issuer				THOMSON
	an amendment and name	e has changed, and	indicate change.)		FINANCIAL
SiGe Semiconductor, Inc.					
Address of Executive Offices		nd Street, City, Sta	nte, Zip Code)	1 -	er (Including Area Code)
2680 Queensview Drive, Ott				(613) 820-9	
Address of Principal Business Operations (if different from Executive Offices)	(Number a	nd Street, City, Sta	ite, Zip Code)	Telephone Numbe	er (Including Area Code)
Brief Description of Business:					
Fabless semiconductor compa	ny				
Type of Business Organization	-				**
□ corporation	limited partnership	p, already formed			03000212
			☐ oth	her (please specify):	03000212
business trust	limited partnershi	p, to be formed	Year		
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organization	on: (Enter ty		0 2 al Service abbreviation ner foreign jurisdiction	n for State:	mated
GENERAL INSTRUCTIONS					
Federal: Who Must File: All issuers making an offe	ring of securities in relia	ince on an exempti	on under Regulation D	or Section 4(6), 17 CFF	R 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no la Commission (SEC) on the earlier of the date it was mailed by United States registe	ate it is received by the	SEC at the address			
Where To File: U.S. Securities and Exchar	ige Commission, 450 Fif	fth Street, N.W., W	ashington, D.C. 20549	9.	
Copies Required: Five (5) copies of this no of the manually signed copy or bear typed		the SEC, one of w	hich must be manually	signed. Any copies not	manually signed must be photocopies
Information Required: A new filing must information requested in Part C, and any n SEC.					
Filing Fee: There is no federal filing fee.					
State: This notice shall be used to indicate reliand have adopted this form. Issuers relying on					

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state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;

 Each general and m 	ianaging partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, Derbyshire, James H.	if individual)				
Business or Residence Addr 470 Manor Avenue, Ro			Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Bower, R. Stephen	if individual)				
	or Inc., 2680 Qu	eensview Drive, Ottawa	a, Ontario K2B 8J9		
Check Box(es) that Apply:	TIMES.	→ Beneficial Owner → □ → □ → □ → □ → □ → □ → □ →	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Caisse de dépôt et plac	ement du Québ				
Business or Residence Addr 1981 McGill College A	ve., Montreal, (QC H3A 3C7	1976 - 19		
Check Box(es) that Apply:		☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Prism Venture Partne	rs IV L.P.				
Business or Residence Addr 100 Lowder Brook Dr	ive, Westwood, 1	. •	Code)		
Check Box(es) that Apply:		□ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Toronto Dominion Inv	estment, Inc.				
Business or Residence Addr 909 Fannin, Suite 1700), Houston, TX	77010			
Check Box(es) that Apply:		☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, 3i Technology Partner	s L.P.				
Business or Residence Addr 880 Winter Street, Sut					
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	(\$34884 50 profit 50 \$66607	☐ General and/or Managing Partner
Full Name (Last name first, SiGe Semiconductor I	nc.	and The Transfer of the			
Business or Residence Addr 2680 Queensview Driv			Code)		en tens

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		11.			B. II	NFORMA	TION AB	OUT OFF	ERING				*
1	TT 41-	. :	.1 1.	- 41 !	:	11 4	1:					Yes	No
1.								🛛					
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?								N/A					
۷٠	2. what is the minimum investment that will be accepted from any individual?												
3.	3. Does the offering permit joint ownership of a single unit?								Yes ⊠	No □			
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in												
	any co the of SEC a	ommission fering. If and/or with	n or simila a person t h a state o	r remuner to be listed r states, lis	ration for a d is an ass st the name	solicitation sociated pe e of the br	of purcha erson or ag oker or dea	sers in con ent of a br aler. If mor	nection wi oker or de e than five	th sales of aler registe (5) person	Securities in ered with the as to be listed ker or dealer		
Full		(Last nar	ne first, if	individual	1)								
	N/A	•	,		,								
Bus		r Residen	ce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Co	de)					
Nan	ne of A	ssociated	Broker or	Dealer									
Stat							licit Purcha						
	(Chec	k "All Sta	ites" or ch	eck indivi	dual States	s)			***************************************		•••••	🗖 All :	States
[4	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
-	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
_	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name	(Last nar	ne first, if	individua	1)								
Puc	inacc o	r Dacidan	ca Addres	s (Numba	r and Strae	t City St	ate, Zip Co	da)					
Dus	111688 0	i Residen	ice Addres	s (munioc	i and succ	or, Crry, Su	ate, Zip Co	ide)					
Nan	ne of A	ssociated	Broker or	Dealer				··· •					
Stat	es in V	Vhich Pers	son Listed	Has Solic	ited or Int	ends to So	licit Purcha	asers					
	(Chec	k "All Sta	ites" or ch	eck indivi	dual States	s)				•••••		🗖 All	States
[4	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
-	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name	(Last nar	ne first, if	individua	1)								
Bus	iness c	r Residen	ce Addres	s (Numbe	r and Stree	et, City, St	ate, Zip Co	de)			,		
Nar	ne of A	Associated	Broker o	r Dealer						<u>, ,</u>			
Stat	es in V	Vhich Per	son Listed	Has Solic	ited or Int	ends to So	licit Purch	asers					
												🗆 All	States
[.	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the tamount already sold. Enter "0" if answer is "none" or "zero." If the transaction is exchange offering, check this box and indicate in the columns below the amount of the securities offered for exchange and already exchanged.	s an					
	Type of Security	A	ggregate offering Price		Amount Already Sold		
	Debt	\$		9	\$		
	Equity			_			
	□ Common	\$	de minimis^	9	\$		
	Convertible Securities (including warrants)	\$		_	\$		
	Partnership Interests	\$		— <u> </u>	s —		
	Other (Specify)	\$		_ ;	s —		
	Total	\$	····	_ 5	s —		
	Answer also in Appendix, Column 3, if filing under ULOE.	ì	+m1	_			
2	Enter the number of accredited and non-accredited investors who have purcha		*These shares			•	
4.	securities in this offering and the aggregate dollar amounts of their purchases.						
	offerings under Rule 504, indicate the number of persons who have purcha	sed	Semiconducto	or I	nc.	, a Canadian	
	securities and the aggregate dollar amount of their purchases on the total lines. Es						
	"0" if answer is "none" or "zero." sidiary of the issuer of the holder does not need to pay a						
	sideration for redemotion or excl	ar y han	additional oc	n_/	An	nount of	
	O Take to Television of the Care to Televisi		umber Investors		Pu	ırchases	
	Accredited Investors		6	\$		de minimis	
	Non-accredited Investors		6	\$		de minimis	
	Total (for filings under Rule 504 only)		12	\$			
	Answer also in Appendix, Column 4, if filing under ULOE.					<u>de minimi</u> s	
3.	If this filing is for an offering under Rule 504 or 505, enter the information reques for all securities sold by the issuer, to date, in offerings of the types indicated, in twelve (12) months prior to the first sale of securities in this offering. Classecurities by type listed in Part C – Question 1. Type of Offering Rule 505	the	Type of Security		Do \$	ollar Amount Sold	
	Regulation A				\$		
	Rule 504		NI/A).T/A	
			N/A		\$	N/A	
	Total				\$		
4.	a. Furnish a statement of all expenses in connection with the issuance distribution of the securities in this offering. Exclude amounts relating solely organization expenses of the issuer. The information may be given as subject to fur contingencies. If the amount of an expenditure is not known, furnish an estimate check the box to the left of the estimate. Transfer Agent's Fees	y to ture			\$		
	Printing and Engraving Costs				\$		
	Legal Fees				\$		
	Accounting Fees				\$		
	Engineering Fees				\$		
	Sales Commissions (specify finders' fees separately)				\$		
	Other Expenses (identify) Canadian Filing Fee				\$		
	Total				\$	N/A	
	2 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			ш	Ψ.		

	C. OFFERING PRICE, 1	NUMBER OF INVESTORS, EXPENSES	AND USE	OF PROC	EEDS		
		egate offering price given in response to Part C esponse to Part C - Question 4.a. This difference			\$_	N/A	
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed to the amount for any purpose is not known, furnist estimate. The total of the payments listed must efforth in response to Part C - Question 4.b above.	h an qual Payn	nents to			
				ctors &			
				iliates	Payments To Others ☐ \$		
	Salaries and fees		□ \$				
	Purchase of real estate		□ \$		□ \$		
	Purchase, rental or leasing and insta	allation of machinery and equipment	□ \$		□ \$		
	Construction or leasing of plant but	ldings and facilities	□ \$		□ \$ ¯		
	this offering that may be used in	cluding the value of securities involved in exchange for the assets or securities of	□ \$		_ \$		
	•		□ \$ -		□ \$		
	• •		□ \$		□ \$ -		
	• .		□ \$ -		□ \$ -		
	• • • • • • • • • • • • • • • • • • • •		_	***	_		
		1 11 18	□ \$ □ °		_ _ _ \$ _		
	Total Payments Listed (column total	als added)	□ \$		N/A		
		D. FEDERAL SIGNATURE					
the	following signature constitutes an under tten request of its staff, the information f	signed by the undersigned duly authorized ertaking by the issuer to furnish to the U.S. furnished by the issuer to any non-accredited	Securities	and Exchar	ige Comr	nission, upon	
Issuer (Print or Type) Signature Date							
SiG	e Semiconductor, Inc.	1 / A Aon		Decembe	r20, 200	02	
	e of Signer (Print or Type)	Title of Signer (Print or Type)			· · · · · · · · · · · · · · · · · · ·		
D C	tanhan Dawar	Sagnatami					

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)